## MULTIPLE DEPENDENT CLAIM FEE CALCU TION SHEET ORM PTO-875) · (FOR USE WITE

SERIAL NO. 10/53 APPLICANT(S)

FILING DATE

CLAIMS

	AS FILED AFTER AFTER AS FILED AFTER AFTER												
	IND. DEP.		I AMENDMENT IND. DEP.		1 AMENDMENT IND. DEP.			AS FILED		(*AMENDMENT		AFTER -	
1	1	22.	MILD.	DEI.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
2	<del>. • • • • • • • • • • • • • • • • • • •</del>	-;					51						201.
3		,					52 53						<u> </u>
4						<del> </del>	<u>53</u>			-			
_ 5		1											
6		_ 1					55						
7							<u>56</u> 57						
8							58	<del></del>					
9		1					59	<del></del>					
10		1					60						
11	<u> </u>	1					61						
12							62		•			<u> </u>	
13							63						
14							64 .						
15 16					· · · · ·		65				-		
17							66					-	
18	<del></del>	<del></del>					67						
19	<del></del>						68						
							69						
21			<u>:</u>				70						
22							71						
23							72						
24							73						
25		-	-				74 75						
26							76						
27			· ·				1 77						
28							78						
29							79.	<del></del>					
30		- 37			V (2)		80			<del></del>		-	
31		,					. 81	1					<del></del>
32							82						
33							83						
34							84						<del></del>
35							85			·			
36							. 86						
37							87					-	
38							88						
39							89					V (C) - (C)	77-11-11
40							90						
42				<u></u>			91						
43		<del> </del>					92						<u>· ·                                    </u>
44				7			93			·			
45							94						
46							96						
47				<del></del>			90			}			
	1						98						
49	<u>.</u>						99						
50							100						<del></del>
TOTAL END.	4	#		4		#	TOTAL IND.		4		1		1
TOTAL DEP	18	4		42		4	TOTAL DEP		4		4		4
CLAIMS	22						TOTAL CLAIMS						